

## **Medicaid Cancer Program September Changes**

Section 319 of the A, B, D manual has been revised to include the following changes in the Medicaid Cancer Program:

- Coverage for a woman diagnosed with a pre-cancerous condition is limited to the month coverage becomes effective and the two following months for a maximum of three months of coverage.
  - Form 928- The Medicaid Cancer Program Referral Form 928 has been revised. UCCP will mark on the form if the woman is need of treatment for a precancerous condition of breast or cervical cancer. If this box is marked, then the woman is only eligible for the Medicaid Cancer Program for 3 months of coverage beginning with the month of diagnosis.
  - MMPT Notice – A new combined approval/denial notice has been created in PACMIS. Use this notice when approving a woman with a precancerous condition for the Medicaid Cancer Program and then closing the program at the end of three months of eligibility.
- At review, if the woman still needs treatment, she must answer questions about health insurance coverage and have her doctor complete the questions on the review form regarding whether the woman still needs treatment. The completed review form must be returned to the eligibility worker or the case will auto close.
  - Form 61 CR – A new review form has been created (in both English and Spanish) to replace the XMCR notice that used to mail at review. The woman is now required to complete and return this form annually when the review is due. The review form requires her doctor to determine and verify that the woman is still in “need of treatment” for breast and/or cervical cancer.
    - The benefit effective date of the Medicaid Cancer program (DM/W) is used to determine when the annual review should be sent. For example, if the DM/W program began in Nov 2003, the case is eligible through Oct. 2004 (12 months). The review is sent in September and is due back Oct. 1. If the review is not returned, DM/W will auto close on the 20<sup>th</sup> of October, effective the end of October.
    - Instructions for the 61 CR have also been created.
    - DM/W reviews are not affected by the review dates of other programs that might be open on the case

- PACMIS procedures for DM/W reviews.
  - When a DM/W review is mailed, the mail date is displayed on the RERE screen under DM/W print date (DM/W PR DATE). A “Y” is displayed in the REV DUE field to the right, which indicates that a review is due to be returned.
  - When a review is returned, blank out the “Y” in the REV DUE field on the RERE screen, copy to the next month, work the review and authorize or close the program if not eligible.
  - If the review is not returned, take no action. The auto close program will auto close the DM-W programs with a “Y” effective the end of the month following the month it was mailed. The auto close program will also remove the “Y” on RERE so that if DM-W is reinstated, the worker will not need to remove it.
- Two edits messages have been added to RERE . They are:
  - “A BLANK MEANS THAT CONTINUED CANCER TREATMENT HAS BEEN VERIFIED” is displayed when the “Y” in the DM/W REV DUE field is blanked out.
  - “THIS FIELD CAN ONLY BE CHANGED TO BLANK” is displayed when a character other than blank is entered in the DM/W REV DUE field.

**See InfoSource - A ,B, D- Section 319 for updated policy.**